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				Marianne Crima		(Depositor's name)	
			ļ-,	Marianse June 13, 2007	Crimal	(Signature)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.	
10/769,968	02/02/2004		Mark S. Miller		21220/04180	9130	
TITLE OF INVENTION: METHOD AND APPARATUS FOR DETECTING CONTAMINANTS ON A WINDOW SURFACE OF A VIEWING SYSTEM UTILIZING LIGHT							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/18/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
DETSCHEL, MARISSA 1. Change of correspondence address or indication		2886	356-239800				
CFR 1.365). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be p	Ta single firm (having as a member a net action or agent) and the names of up to cent attorneys or agents. If no name is will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
ROSEMOUNT AEROSPACE INC., BURNSVILLE, MN							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government							
☐ Sissue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			 Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) □ A check is enclosed. □ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-0172 (enclose an extra copy of this form). 				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee and Interest as shown by the rec	Publication Foo (if requi	rad) will not be account 1	C	applicant; a registered at	torney or agent; or the as	ssignee or other party in	
Authorized Signature June 13, 2007							
Typed or printed name / Brian E. Kondas Registration No. 40,685							
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